Substitute for form 1449/PTO				Complete if Known		
INFORMATION DISCLOSURE STATEMENT BY APPLICANT				Application Number	10/663,895-Conf. #4522	
				Filing Date	September 16, 2003	
				First Named Inventor	Gail A. Alverson	
				Art Unit	2195	
(Use as many she ets as necessary)			necess ary)	Exeminer Name	M. P. Wilser	
Sheet	1	of	1	Attorney Docket Number	324758001US2	

U.S. PATENT DOCUMENTS					
Exeminer Initials*	Citte No.1	Document Number Number-Kind Code ² (If known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevent Passages or Relevant Figures Appear
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Examiner Initials*	Cite No.1	Foreign Patent Document Country Code ³ -Number ⁴ -Kind Code ⁴ (If known)	Publication Date MM-DD-YYYY	Neme of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear	T°

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